


## APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

<b>Title of Invention</b>	SELF-ALIGNED ARRAY CONTACT FOR MEMORY CELLS		
Application Type : regular, utility Attorney Docket Number : FIS920030171			
Correspondence address: Customer Number: 32074 			
<b>Inventors Information:</b>  <u>Inventor 1:</u> <b>Applicant Authority Type:</b> Inventor <b>Citizenship:</b> US <b>Given Name:</b> Rama <b>Family Name:</b> Divakaruni <b>Residence:</b> <b>City of Residence:</b> Ossining <b>State of Residence:</b> NY <b>Country of Residence:</b> US <b>Address-1 of Mailing Address:</b> 60 Sherwood Avenue <b>Address-2 of Mailing Address:</b> <b>City of Mailing Address:</b> Ossining <b>State of Mailing Address:</b> NY <b>Postal Code of Mailing Address:</b> 10562 <b>Country of Mailing Address:</b> US <b>Phone:</b> <b>Fax:</b> <b>E-mail:</b>  <u>Inventor 2:</u> <b>Applicant Authority Type:</b> Inventor <b>Citizenship:</b> US <b>Given Name:</b> Johnathan <b>Middle Name:</b> E. <b>Family Name:</b> Faltermeier			

**Residence:**

**City of Residence:** LaGrangeville  
**State of Residence:** NY  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 119 Stringham Road, Apt. 7  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** LaGrangeville  
**State of Mailing Address:** NY  
**Postal Code of Mailing Address:** 12540  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

**Inventor 3:**

**Applicant Authority Type:** Inventor  
**Citizenship:** DE  
**Given Name:** Michael  
**Family Name:** Maldei  
**Residence:**  
**City of Residence:** Durham  
**State of Residence:** NC  
**Country of Residence:** US  
**Address-1 of Mailing Address:** 4609 Regency Drive  
**Address-2 of Mailing Address:**  
**City of Mailing Address:** Durham  
**State of Mailing Address:** NC  
**Postal Code of Mailing Address:** 27713  
**Country of Mailing Address:** US  
**Phone:**  
**Fax:**  
**E-mail:**

**Inventor 4:**

**Applicant Authority Type:** Inventor  
**Citizenship:** US  
**Given Name:** Jay  
**Family Name:** Strane  
**Residence:**  
**City of Residence:** Chester  
**State of Residence:** NY  
**Country of Residence:** US

**Address-1 of Mailing Address:** 2523 Whispering Hills Drive

**Address-2 of Mailing Address:**

**City of Mailing Address:** Chester

**State of Mailing Address:** NY

**Postal Code of Mailing Address:** 10918

**Country of Mailing Address:** US

**Phone:**

**Fax:**

**E-mail:**

Attorney Information:

practitioner(s) at Customer Number:

32074



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Assignee 1:

**Organization Name:** International Business Machines Corporation

**Address-1 of Mailing Address:** New Orchard Road

**Address-2 of Mailing Address:**

**City of Mailing Address:** Armonk

**State of Mailing Address:** NY

**Postal Code of Mailing Address:** 10504

**Country of Mailing Address:** US

**Phone:**

**Fax:**

**E-mail:**

Assignee 2:

**Organization Name:** Infineon Technologies North America Corp

**Address-1 of Mailing Address:** 1730 North 1st Street

**Address-2 of Mailing Address:**

**City of Mailing Address:** San Jose

**State of Mailing Address:** CA

**Postal Code of Mailing Address:** 95112

**Country of Mailing Address:** US

**Phone:**

**Fax:**

**E-mail:**